

STATE OF CALIFORNIA  
**PEST CONTROL DEALER LICENSE  
RENEWAL APPLICATION**

PR-PML-191 (REV. 9/04)  
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DEPARTMENT OF PESTICIDE REGULATION  
PEST MANAGEMENT AND LICENSING BRANCH  
LICENSING AND CERTIFICATION PROGRAM  
1001 I STREET  
SACRAMENTO, CALIFORNIA 95814-2828  
(916) 445-4038  
FAX - (916) 445-4033  
Web site: <http://www.cdpr.ca.gov/>

☐ Name Change ☐ Address Change

Business License Number: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

IMPORTANT - PLEASE READ  
COMPLETE ALL INFORMATION FOR EACH LOCATION AND THE RENEWAL INFORMATION REQUIREMENTS

**Qualified Person.** Each business location must have a qualified person who possesses a valid Agricultural Pest Control Adviser License, Pest Control Dealer Designated Agent License, Pest Control Pilot Certificate, or Qualified Applicator License to engage in pest control from each location. If you need additional space, attach a separate sheet of paper.

**Main/Branch**

**License Number**

**Business Location Address**

**Qualified Person's Name and License Number**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Fees.** See Page 2 (instructions) to determine fees based on the number of business location(s) and payment methods. **ALL FEES ARE NON-TRANSFERABLE AND NON-REFUNDABLE.**

Indicate Amount Enclosed: \$ \_\_\_\_\_

**I declare under penalty of perjury, under laws of the State of California, that the above information provided by me is true and correct.**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE SIGNED

FOR OFFICIAL USE ONLY

IMPRINT

PROBLEM

RENEWED

DATA ENTRY

RC

**Instructions on reverse**

**PEST CONTROL DEALER LICENSE RENEWAL APPLICATION INSTRUCTIONS**

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**RENEWAL TIME LINE**

Renewal time lines have been established to help determine when you may expect to receive your license or certificate based on the date your renewal application is received by the Licensing and Certification Unit. Renewal time lines are posted on the Department of Pesticide Regulation's (DPR's) web site.

**CHECK LIST:** This list will help ensure that your renewal application is completed in full prior to mailing.

- ☐ **Change of Name/Address.** 3CCR Section 6508 requires all license/certificate holders to notify DPR immediately of any change in business name, address, qualified person, business organization, or any other information required on the application. Indicate any corrections that appear on the renewal form in the space provided.

*Licenses are not transferable. In the case of change of business organization or ownership, a new application and fee are required. If you had a change in ownership or partners or have incorporated, contact us.*

- ☐ **Qualified Person.** Each pest control business location (Main or Branch) must have a qualified person who possesses a valid Agricultural Pest Control Adviser License, Pest Control Dealer Designated Agent License, Pest Control Pilot Certificate, or Qualified Applicator License to engage in pest control from each location. Provide the name(s), license/certificate type(s), and license/certificate number(s) of the qualified person who is responsible for each location in the space provided on the renewal form. If additional space is needed, attach a separate sheet of paper.
- ☐ **Fees.** All fees are non-transferable and non-refundable. Fees must be paid for each pest control license location (Main and Branch) as totaled on the renewal form. A late penalty fee of fifty percent (50%) of the total renewal fee will be assessed for each license **postmarked after December 31.**

**License Renewal (2 Year) and Late Penalty Fees**

	Renewal	Late Fee		Renewal	Late Fee
Pest Control Dealer License (Main)	\$320.00	\$160.00	Pest Control Dealer License (Branch)	\$160.00	\$80.00

- ☐ **Declaration/Signature.** Sign, title, and date the renewal application form.
- ☐ **Payment.** Enclose a check, money order or credit card payment payable to "Cashier, Department of Pesticide Regulation".
- ☐ **Mail.** Send payment, completed renewal application form, and all required documents in the enclosed envelope addressed to: Cashier, Department of Pesticide Regulation, P.O. Box 4015, Sacramento, California 95812-4015.

**Questions?** Your business name and license number will be posted to DPR's web site as soon as your application is approved and logged into the database. Our web site address is <http://www.cdpr.ca.gov/docs/license/currlic.htm>. For other questions about your application, please contact the Licensing and Certification Program at (916) 445-4038.

**Failure to complete or provide the requested information may delay the processing of your application.**